

Application for Renewal of Alcoholic Beverages License

Board of Liquor License Commissioners for Baltimore City - Renewal 2015

Establishment Information

Corporate/ Partnership /Entity Name: Harbor East Brewery, LLC

Trade Name: Gordon Biersch Brewery Restaurant Class Type: B Bus Phone: (410) 230-9501

Location address: 1000 Lancaster St., Ste B., Baltimore, MD 21202

Mailing Address: 8001 Arista Pl Ste 500 City / State: Broomfield, CO ZIP Code: 80021

Are the operations open? ☒ YES ☐ NO If NO, when did it close? n/a Last 8 Digits Sales Tax ID# 14827310

Is the property owned or leased? ☒ YES ☐ NO Leased If leased, expiration date: 1/31/2023

On what floors does your business operate? Ground Floor Where is your alcohol stored?

Provide capacity as per Fire Dept.? 310 For Class "B" only over 150, list dining capacity? 136

If applicable: General Manager Name: Justin Shunkwiler

Manager Phone: (410)230-9501 Email: jshunkwiler@cwrestaurants Cell or Fax: 303 942 7414

Licensee 1 Information

Name: Rebecca Fischer

Current Home address: 129 Skyview Ct How long? 20 years

Phone: E-mail: bfischer@cwrestaurants.com Cell:

City: Louisville State: CO ZIP Code: 80027

Date of Birth 8/ /64 Are you a City Resident? ☐ YES ☒ NO City resident, how long?

If not a City resident please list property owned on which taxes are paid: n/a

Licensee 2 Information

Name: Courtney Mowry

Current Home address: 8084 Moore St How long? 11 years

Phone: E-mail: cmowry@cwrestaurants.com Cell:

City: Arvada State: CO ZIP Code: 80005

Date of Birth 9/ /64 Are you a City Resident? ☐ YES ☒ NO City resident, how long?

If not a City resident please list property owned on which taxes are paid: n/a

Licensee 3 Information

Name: Robert Zissel

Current Home address: 6021 Pinehurst Rd How long? Sur.

Phone: E-mail: rzissel@loyola.edu Cell:

City: Baltimore State: MD ZIP Code: 21212

Date of Birth 4/ /77 Are you a City Resident? ☒ YES ☐ NO City resident, how long?

If not a City resident please list property owned on which taxes are paid:

Below are a series of questions regarding your operations and all questions must be answered so that your application can be deemed complete. Note that all information must be provided under state law for license renewal. (Mark X below)

	Yes	No
Do you owe any taxes on merchandise, fixtures of stock to the City or the State for FY 2014-2015 or previous years?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Is your corporation in "Good Standing" with the Maryland Department of Assessment and Taxation?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Do you affirm that all taxes due to state and local agencies are current and up to date?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Have you been convicted and/or found guilty for violating any local, State or Federal criminal offense?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, describe: When: Where:		
n/a		
Do you provide live entertainment? (If not applicable answer NO)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Do you provide outdoor table service? (If not applicable answer NO)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Do you provide off premises catering of food and alcohol? (If not applicable answer NO)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Do you have an up to date Alcohol Awareness Certificate? Expiration date:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Are there any majority stockholder or corporate officer changes from last year?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

If yes, describe and provide information on stockholders: (significant change may require a new application):

n/a

Board of Liquor License Commissioners for Baltimore City

231 E. Baltimore Street, Suite 600, Baltimore MD 21202 - Office Phone: (410) 396-4377 Office Fax: (410) 396-4382

OK

Check # in voice 9052

Do you provide delivery services of alcohol and/or food?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Do you have Workers Compensation insurance? If yes enter policy # <u>WAT650</u> Expiration Date <u>6/1/15</u> Insurance Carrier <u>Liberty Ins. Corp.</u> If No, please note, number of employee: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Do you directly or indirectly own or have any interest of any kind as owner, stockholder, financially or otherwise, in any establishment to or for which a license has been issued anywhere in the State of Maryland, or are you a creditor or have made any loans to license holder?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If yes, describe: <u>Please see attached</u>		

Signatures	
I/We hereby certify that I/We are the licensed operator/s of the establishment applied for in this renewal for "Alcoholic Beverages License" for 2015-2016. I/We hereby authorize the Maryland State Comptroller, his duly authorized deputies, inspectors and clerks, the Board of Liquor License Commissioners for Baltimore City, its duly authorized agents and employees, and any Maryland State Police Officer/Trooper, and any peace officer of the City of Baltimore, to inspect and search, without warrant, the premises upon which the business is to be conducted, and any and all parts of the building in which said business is to be conducted, at any and all hours.	
Signature of licensee: <u>Rebecca Fischer</u>	Date: <u>2/27/15</u>
Signature of licensee: <u>[Signature]</u>	Date: _____
Signature of licensee: <u>Signed in counterpart</u>	Date: _____

AFFIDAVIT

STATE OF MARYLAND, City of Baltimore, ss:

I hereby certify that on the 27 day of February, 2015 before me, the subscriber, a notary public of the State of Maryland, in and for Colorado, personally appeared Rebecca Fischer and Courtney Murray the applicant(s) named in this renewal application made oath in due form of law that the matter and facts contained in said application are true and correct.

As witness, my hand and notarial seal.

Stephanie L. Devine
Name: _____

[Notary Seal]
My Commission expires 10/20/17

STEPHANIE L. DEVINE
NOTARY PUBLIC
STATE OF COLORADO
NOTARY ID# 19974019103
MY COMMISSION EXPIRES 10/20/2017

READ CAREFULLY	
If any of the facts, other than age and home address have changed it will be necessary to apply for new license on the form required for a transfer and/or modification.	
If this application is not filed on or before March 31, 2015 to the office of Board, 231 E. Baltimore Street, Suite 600, a late fee of \$50.00 per day may be imposed by the board up to a maximum of \$1,500.00 and the license will not be renewed as of May 1, 2015.	
Application Fee \$50.00	
Extract from Section 16-501 of Article 2B of the State of Maryland – Alcoholic Beverage Laws: If any signed statement, affidavit or oath required under the provisions of this Act shall contain any false statement, the offender shall be deemed guilty of perjury, and upon conviction thereof, shall be subject to the penalties by law for that crime.	
For BLLC Staff Only: <i>Please ADD Staff Initials and notes</i>	
Received Date: _____	Contact Date(s) _____
Status : Complete Date: _____	Incomplete: _____